



Appln. No.: 09/387,696

BSI-210US2

Response to Restriction Requirement Dated April 8, 2004

Reply to Restriction Requirement of March 8, 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No.: 09/387,696
Applicant: George Goicoechea et al.
Filed: August 31, 1999
Title: BIFURCATED ENDOLUMINAL PROSTHESIS
TC/A.U.: 3738
Examiner: Javier G. Blanco
Confirmation No.: 2901
Docket No.: BSI-210US2

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RESPONSE TO RESTRICTION REQUIREMENT

Commissioner for Patents
P.O. Box 1450
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S I R :

This is in response to the Restriction Requirement stated in the Office Letter dated **March 8, 2004**.

The Examiner requires that claims of either Species A (claims 54, 57), Species B (claim 55), or Species C (claim 56) be elected for prosecution. Applicants provisionally elect to prosecute Species A embodied in claims 54 and 57. This election is made with traverse.

Respectfully submitted,

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Stanley Weinberg, Reg. No. 25,276
Attorneys for Applicants

SW/ap

Dated: April 8, 2004

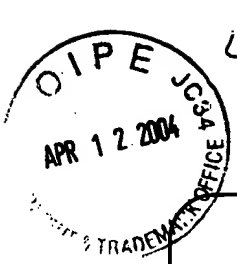
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/387,696
	Filing Date	August 31, 1999
	First Named Inventor	George Goicoechea
	Art Unit	3738
	Examiner Name	Javier G. Blanco
Total Number of Pages in This Submission	Attorney Docket No.	BSI-210US2

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Response to Restriction Requirement (1 pg), Return Receipt Postcard
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm or Individual Name	Stanley Weinberg	Registration No. (Attorney/Agent)	25,276
Signature	<i>Stanley Weinberg</i>		
Date	April 8, 2004		

CERTIFICATE OF TRANSMISSION / MAILING			
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